

PHYSIOTHERAPY AND INDUSTRIAL INJURIES<sup>1</sup>

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The Trade Union Clinic is situated centrally in the large industrial area west of Melbourne. It was established nine years ago by the Australasian Meat Industry Employees Union, to give adequate treatment to the large number of meat workers and others in the surrounding areas.

It functions as an out-patients department, primarily for the treatment of the injured worker but these patients, their families and anyone else may also consult a doctor in a private capacity. It is staffed by eight doctors in the casualty department, sessional and full-time orthopaedic specialists, a sessional dermatologist and physicians, radiographers, interpreters and 3 full-time physiotherapists.

The Clinic conducts a family planning clinic and has a department of occupational health. This department, established in 1971, carries out research into matters affecting the health and welfare of members of unions, employee organisations and others. It aims at working at grass roots level, especially in identifying particularly hazardous and unhealthy jobs, in implementing safety, in hearing conservation programmes and evaluating the effectiveness of such programmes. A reference and information centre has been built up to handle the many queries that come from unions and management in regard to matters of occupational health. Using this as a basis, it has been possible to carry out specific studies required by unions and employers, and several such studies have been carried out—particularly in the field of accident prevention.

Patients treated have had what is regarded as a minor accident. Those with more serious injuries are usually sent to the casualty departments of the main hospitals. All our patients are ambulant and are able to convey themselves from their home to the clinic, for treatment. The patient, who is referred by a doctor at the clinic for physiotherapy treatment, is seen immediately and his rehabilitation programme is instituted. The time factor here probably plays a part in minimising the overall healing time. The patient is quickly introduced to a means that will give him relief from the pain of the injury and relief from the anxiety felt by anyone after an injury which is severe enough to warrant medical attention and time off work.

A good liaison has been developed between the physiotherapists and the casualty staff, so that acute injuries, particularly closed soft-tissue injuries are referred to the physiotherapy department to start treatment as soon as possible. When a new member joins the casualty staff, he is taken on an explanatory

tour of the physiotherapy department so that he is familiar with the available equipment and treatment techniques. Good use is made of the physiotherapy department. The doctors appreciate the depth of our knowledge and it is clear that although a patient will eventually get better, the healing process can often be accelerated with physiotherapy. If treatment problems arise, or if we feel that a specialist opinion may be of benefit, we have easy access to the referring doctor.

Using figures from a survey conducted from September to November, 1972, it is estimated that 25% of the patients who received physiotherapy had a chronic condition (chronic here meaning having had symptoms for at least one month prior to commencing physiotherapy treatment). Of the remaining 75%, who had acute injuries, many of the injuries had occurred the day treatment was begun.

Injuries of the back form the largest group of patients (32%) and hand injuries the second largest (21%). Of the 800-900 patients seen each week at the casualty department of the clinic, about one third have hand injuries.

Of the remaining conditions—chiefly sprains and strains and crush injuries to any part—shoulder injuries are the largest group (10%) followed by injuries involving the foot and/or ankle (9%).

Back injuries are the result of lifting and handling materials, and falls in situations where kinetic training has been omitted or where it has failed. These injuries vary from acute, with severe pain and muscle spasm, to those which manifest no visible disability, but which cause the patient to return from work each day with a tired, aching back.

All of these patients are given advice regarding suitable beds and chairs and correct sleeping and resting positions. An awareness of back posture is created as we teach them how to avoid back strain in daily living situations such as putting on shoes and cleaning teeth, as well as work situations such as lifting heavy or awkward loads.

As the pain settles with rest, heat and analgesics, a graduated exercise programme is started, for the patient to practise at home, and he is encouraged to improve his general fitness by taking exercise such as swimming or walking.

Most of the hand injuries are accidents with knives amongst the meat workers, and are lacerations of varying degrees, including minor involvement of tendinous, ligamentous and capsular structures. Injuries requiring more extensive surgery are referred to a plastic surgeon outside the clinic.

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Other injuries are crushes or blows as a result of, for example, falling material.

Hand injuries are treated immediately where swelling needs to be controlled, as in acute, closed soft-tissue injuries, or where encouragement is necessary to maintain mobility.

All injuries are treated with either heat, in the forms of microwave, shortwave, diathermy, infra-red radiation, ultrasonic or wax baths, or by cold therapy in the form of a "Cryogel" cold pack. These packs are plastic bags filled with a synthetic gel that is

flexible and which readily moulds around the part being treated. Their application is combined with compression of an elastic bandage and elevation. They are clean and easy to use, and are cooled in the freezer compartment of a conventional refrigerator.

Free from the burden of medical costs, the patient covered by Workers' Compensation seeks treatment of his injury quickly, is able to attend daily for maximum treatment and, on the whole, is well motivated to return to work. These factors make for a speedy recovery.